## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

## **Provider Inspection Summary**

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Corrected

## **Facility Information**

**Facility Name: EVELYNS ADULT FAMILY HOME (390137)** 

Address: 336 MICHAEL CT, PORT WASHINGTON, WI 53074

**License Status: REGULAR** 

Licensed/Certified/Registered 09/01/1996

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

**Survey History** 

Survey ID: 0096480 End Date: 01/31/2006 Type: STANDARD Purpose: SURVEY

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10007255 Served 03/11/2006

Deficiencies Cited Subject Area Subject Area Verified

88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS

88.04(5)(b) TRAINING-8 HOURS ANNUALLY 88.10(3)(l) SAFE PHYSICAL ENVIRONMENT

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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**Enforcement History** 

Date: 03/08/2006 SOD #10007255 Appealed: No

**Sanctions** 

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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